

NOV 28 2005

FROMMER LAWRENCE & HAUG LLP

4660 La Jolla Village Drive, Suite 850

San Diego, California 92122

Telephone: (858) 731-5000

Facsimile: (858) 731-5001

E-mail: Firm@flhlaw.com

FACSIMILE COVER LETTER

To: Commissioner for Patents
Firm: U.S. Patent and Trademark Office
Facsimile: 571-273-8300
From: Darren M. Simon
Date: November 28, 2005
Re: U.S. Patent Application No. 09/914,408
Attorney Docket No. 450100-02925
Number of Pages: 22
(Including cover page)
cc:

If you do not receive all pages or are unable to read the transmission, please call and ask for Chiaki (Ext. 5026).

Dear Sir:

In connection with the Application referenced above, the following document is submitted herewith:

- Amendment (20 pages)
- Fee Transmittal (1 page)

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00327738

PATENT
450100-02925

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s) : Hideki NOMA
 Serial No. : 09/914,408
 For : DIAGNOSTIC SYSTEM, DIAGNOSTIC DEVICE, AND DIAGNOSTIC METHOD
 Filed : August 27, 2001
 Examiner : PALADINI, Albert William
 Art Unit : 2125

MAIL STOP AMENDMENT
 COMMISSIONER FOR PATENTS
 Alexandria, VA 22313-1450
 Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☒ No additional fee is required.
☐ The fee has been calculated as shown below.
☐ This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.

Claims as Amended

(1)	(2) Claims remaining after amendment	(3)	(4) Highest number previously paid for	(5) Present extra	(6) Rate	(7) Additional fee
Total claims	32	Minus	60 =	0 x	\$ 25(25)	= \$0
Independent claims	4	Minus	8 =	0 x	\$ 25(100)	= \$0
Total additional fee for this amendment						= \$0

- * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.
 ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.
 *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.

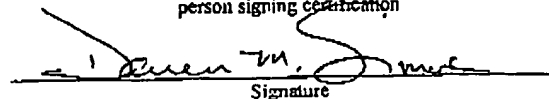
- ☐ This application contains a multiple dependent claim. The required fee of \$360 (\$180) has been previously paid ☐, or is paid herewith ☐.
- ☐ This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a - month extension of time. A check covering the cost of the petition is enclosed.
- ☐ A USPTO Form 2036 - Credit Card Payment Form in the amount of \$.00 is attached, which covers the cost of ☐ additional claims and ☐ - month petition for extension of time.
- ☐ Charge \$ to Deposit Account No. 50-0320.
- ☒ Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.

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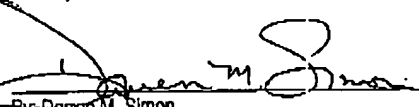
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Signature

November 28, 2005

Date of Signature

FROMMER LAWRENCE & HAUG, LLP
Attorneys for Applicant(s)

By: 
Reg. No. 47,946
Tel. (212) 588-0800

00327737

PATENT
450100-02925**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****RECEIVED**
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Applicant(s) : Hideki NOMA
Serial No. : 09/914,408
For : DIAGNOSTIC SYSTEM, DIAGNOSTIC DEVICE, AND
DIAGNOSTIC METHOD
Filed : August 27, 2001
Examiner : Albert Paladini
Art Unit : 2125

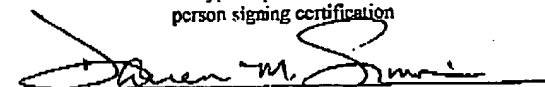
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Signature

November 28, 2005

Date of Signature

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Responsive to the non-final Office Action which issued September 14, 2005, please
consider the following amendment to the above-referenced application.